

for the
District of Minnesota

United States of America

V.

Gage Anthony Norris

Defendant

Case No. CR 20-167 NEB/TNL (1)

ARREST WARRANT

To: Any authorized law enforcement officer

YOU ARE COMMANDED to arrest and bring before a United States magistrate judge without unnecessary delay

(name of person to be arrested) **Gage Anthony Norris**

who is accused of an offense or violation based on the following document filed with the court:

✓ Indictment

Superseding Indictment

Information

Superseding Information

Complaint

Probation Violation Petition

Supervised Release Violation Petition

Violation Notice

Order of the Court

This offense is briefly described as follows:

Count 1 - Felon in Possession of Firearm - Armed Career Criminal, 18:922(g)(1) and 924(e)(1).



Date: 08/11/2020

Issuing officer's signature

City and state: Minneapolis, MN

Katie Thompson, Deputy Clerk

Printed name and title

Return

This warrant was received on (date) _____, and the person was arrested on (date) _____
at (city and state) _____.

Date: _____

Arresting officer's signature

Printed name and title

**This second page contains personal identifiers provided for law-enforcement use only
and therefore should not be filed in court with the executed warrant unless under seal.**

(Not for Public Disclosure)

Name of defendant/offender: _____

Known aliases: _____

Last known residence: _____

Prior addresses to which defendant/offender may still have ties: _____

Last known employment: _____

Last known telephone numbers: _____

Place of birth: _____

Date of birth: _____

Social Security number: _____

Height: _____ Weight: _____

Sex: _____ Race: _____

Hair: _____ Eyes: _____

Scars, tattoos, other distinguishing marks: _____

History of violence, weapons, drug use: _____

Known family, friends, and other associates (*name, relation, address, phone number*): _____

FBI number: _____

Complete description of auto: _____

Investigative agency and address: _____

Name and telephone numbers (office and cell) of pretrial services or probation officer (*if applicable*): _____

Date of last contact with pretrial services or probation officer (*if applicable*): _____